



ROLE OF THE CLAIMS COORDINATOR

Each member municipality in the JIF appoints a Claims Coordinator. It is the responsibility of the Claims Coordinator to oversee the reporting of claims within the municipality and serve as a liaison between the municipality, the Claims Administrator (TPA), and the Managed Care Organization (MCO). The Claims Coordinator can be very effective in controlling the ultimate cost and outcome of claims.

The Claims Coordinator usually has the following responsibilities:

- Coordinate prompt reporting of all claims within the municipality.
- Maintain supply of claim forms.
- Serve as a liaison between the municipality, the Claims Administrator, and the Managed Care Organization.
- Direct injured employees to the appropriate medical provider for initial medical evaluation. Follow up with employee/claims adjuster/supervisor as necessary to track progress of claim.
- Direct supervisors to "Incident Investigation Reports" on the JIF website; encourage completion within reasonable time frame and transmit all reports as indicated.
- Maintain records on all claims submitted.

The Claims Coordinator must be an effective administrative point of contact for the claims adjuster and the managed care organization and should have authority to make decisions on behalf of the municipality. He/she must work effectively with department heads and employees regarding all claims issues affecting your municipality. It is also important that your Claims Coordinator have the respect of all department heads and supervisors since responsibilities will cross departmental boundaries.

Larger municipalities may appoint "Claims Coordinators" within various departments to fulfill some of the above duties on a departmental level.